CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CANDIDATE					
10-14-20/0	NNORE	W C. 11/V/1/2/5				
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DA	5,10			
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State Zip Code	Dhana			
4002 PATTON EDWARD DA	KAST MOVE	-TA 37412	Phone 423-867-3033			
4.b. CANDIDATE'S HOME ADDRESS (if differer Street or Rural Route	nt than 4.a.) City	State Zip Code	Phone			
5. OFFICE SOUGHT (include district number, include district number, inc	Bosno 6. NA	AME OF POLITICAL TREASURER (May	be candidate)			
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER			YEAR-END AL SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. EN	DING DATE OF REPORTING PERIOD				
 9. (Check one) a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. 						
I/we do solemnly swear or affirm that the i accurate accounting of campaign contributi Financial Disclosure Act Additionally, I/we benefit of the candidate or for any other no	ions and expenditures required swear or affirm that no campa	d to be reported by the candidate commit aign contributions have been expended for by the federal internal revenue code.	tee by the Campaign			
signature of candidate	date	signature of political treasurer	date			
11. WITNESS SIGNATURE						
signature of witness	date	signature of witness	date			
12. SUMMARY		2	000			
a. BALANCE ON HAND LAST REPORT		\$ <u>50</u>				
b. TOTAL RECEIPTS THIS PERIOD		\$	A SSION			
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 50 -	- 1.60 100			
d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.)		\$			
e. TOTAL LOANS OUTSTANDING			\$			
f. TOTAL OBLIGATIONS OUTSTANDING.			\$			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE IN FULL	14. REPORT COVERING THE PERIOD					
MNOMIN / IWIII	FROM: 7-/ TO: 9-30					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)						
a. Unitemized Contributions (\$100 or less from each source this period)\$						
b. Itemized Contributions (over \$100 from each source this period)	\$					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$						
16. LOANS RECEIVED THIS REPORTING PERIOD						
17. INTEREST RECEIVED THIS REPORTING PERIOD	s					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$_0					
DISBURSEMENTS						
19. EXPENDITURES (other than loan payments)						
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	.g., printing, postage, gasoline)					
WEBSITE MICTG \$ 50						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
	= ====================================					
Total of Expenditures (\$100 or less each payee)						
b. Itemized Expenditures (Over \$100 each payee this period)						
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)						
20. LOAN REPAYMENTS MADE THIS PERIOD						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)						
22.IN-KIND CONTRIBUTIONS						
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$						
B. Itemized in-kind contributions (over \$100 from each source this period)\$						
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$						
23. OBLIGATIONS						
a. Unitemized Obligations Outstanding (\$100 or less each)\$						
b. Itemized Obligations Outstanding (Over \$100 each)\$						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$						

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVE FROM: 7-					ERING THE PERIOD
Marin // /// 175 FROM: 7-/			TO: 9-30		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
First Name	Middle Na		Contribution Received For:	(contributions totaling more than \$100 from any contribut	
r.				Contribution Received For.	
Last Name/Organization Name			Primary Election	Primary Election General Election	
Address		D Pupoff /Local Floation	Runoff (Local Elections Only)		
AUUICOS		Kulloli (Local Electio	Li Runon (Local Elections Only)		
City	State	Zip Code	Date of Contribution	Date of Contribution	
Occupation					
Employer				-	
First Name	Middle Na	ame	Contribution Received For	Contribution Received For:	
Last Name/Organization Name		Primary Election	☐ Primary Election ☐ General Election		
Address		Runoff (Local Election	Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution	Date of Contribution	
Occupation					
Employer					
First Name	Middle Na	me	Contribution Received For	Contribution Received For:	
Last Name/Organization Name		Primary Election	Primary Election General Election		
Address		Runoff (Local Electio	Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution	Date of Contribution	
Occupation					
Employer			4		
First Name	Middle Na	me	Contribution Received For:	Contribution Received For:	
Last Name/Organization Name		☐ Primary Election ☐	☐ Primary Election ☐ General Election		
Address		Runoff (Local Electio	Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					3
Employer					
TOTAL ITEMIZED CONTRIB (Carry forward to item 3. of next page (If this is the last page of contributions)	if additional pages of this form	are used.)	.)		0

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

			2. REPORT COVER	RING THE PERIOD	
					Amount
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name	Middle Na		THE RESERVE OF THE PARTY OF THE		Amount of Expenditure
Last Name/Business Marine Last Name/Business Marine Last Name/Business Marine Last Name/Business Marine		INERSTIE.	METE	0=	
Address		***************************************	- Jen		50=
City Goddy Dassy	State	Zip Code 37659	Purpose of Expenditure WERSTIE METO BANNEN		
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
Address					
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address		†			
City	State	Zip Code	-		
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					50 ²